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IMPORTANT NOTICE TELECOPY/FACSIMILE COVER LETTER

TO: U.S. Patent and Trademark Office
Examiner: Olisa Anwah
Art Unit: 2645

DATE: September 6, 2005

FROM: Darius G. Adli

TIME: _____

TOTAL NO. OF PAGES, INCLUDING COVER: 8

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MESSAGE:

Patent Application No.: 09/934,870; Our Ref. 83357.0001

I hereby certify that the following documents:

- ☒ Amendment Transmittal Letter
- ☒ Amendment

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are being facsimiled to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450., for filing in the above-identified application.

September 6, 2005
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Juanita Soberanis
Juanita Soberanis

TELECOPY/FAX NUMBER: (571) 273-8300 ART UNIT 2645

CLIENT NUMBER: 83357.0001

ATTORNEY BILLING NUMBER: 5214

CONFIRMATION NUMBER: (return fax to Juanita Soberanis)

FORM PTO-1083

Attorney Docket No. 83357.0001
Customer No. 26021

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Masaki TATEMORI
Serial No: 09/934,870
Confirmation No.: 9269
Filed: August 21, 2001
For: All-Frequency-Band SSB Radio Communication
System and Radio Apparatus

Art Unit: 2645
Examiner: Olisa Anwah

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P.O. Box 1450
Alexandria, VA 22313-1450 on
September 6, 2005
Date of Deposit
Juanita Soberanis
Name
Signature Date 09/06/2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	9	-20	20	0	LG=\$50 SM=\$25	\$ 0
INDEPENDENT CLAIMS FEE	4	-3	3	1	LG=\$200 SM=\$100	\$ 200
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180	\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)					\$250 FOR EACH ADDITIONAL 50 SHEETS	\$ 0
TOTAL						\$ 200

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$___ to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.
- ☐ A check in the amount of \$___ to cover the extension fee is enclosed. A copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

By:

Darius G. Adli
Registration No. 51,386
Attorney for Applicant(s)

Date: September 6, 2005

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Appl. No. 09/934,870
Amdt. Dated September 6, 2005
Reply to Office Action of June 6, 2005

Attorney Docket No. 83357.0001
Customer No.: 26021

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Masaki TATEMORI
Serial No: 09/934,870
Confirmation No.: 9269
Filed: August 21, 2001
For: All-Frequency-Band SSB Radio
Communication System and Radio
Apparatus

Art Unit: 2645

Examiner: Olisa Anwah

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Alexandria, VA 22313-1450 on
September 6, 2005
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Juanita Soberanis
Name
Juanita Soberanis 09/06/2005
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AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated June 6, 2005, please reconsider the
above-referenced application as follows:

Remarks begin on page 2 of this paper.